|  | ) (a)   |            |                                 | -Foi           | <b>MV/</b> | ALABLI                                     | E COPY                                | 1      |                   | 闸  |         |                     |                        |
|--|---|------------|---------------------------------|----------------|------------|--|---------------------------------------|--------|-------------------|--|---------|---------------------|------------------------|
| PATENT APPLICATION FEE DETERMINATION RECE<br>Effective November 10, 1998 |   |            |                                 |                |            |  |                                       |        |                   | Application (*)                                  |         | Docket Nu           |                        |
| CLAIMS AS FILED - PART  <br>(Column 1) (Column 2)                        |   |            |                                 |                |            |  |                                       |        |                   | LENTITY  | OR      | OTHE                | R THAN<br>ENTITY       |
| FOR  |   |            | NUMBER FILED NUMBER E           |                |            |  | EXTRA                                 | 1      | RATE              | FEE  | ק<br>ק  | RATE                | FEE                    |
| BASIC FEE  |   |            |                                 |                |            | -  | · · · · · · · · · · · · · · · · · · · |        |                   | 380.00   | On      |                     | 760.00                 |
| TOTAL CLAIMS   |   | di         | minus                           | 20=            | . 2        |  |                                       | X\$ 9= |                   | OR   | 10000   | 3/2                 |                        |
| INDEPENDENT CLAIMS   |   |            | 2                               | minus          | 33=        | •  |                                       |        | X39=              | 1  |         | X78=                | 1                      |
| MULTIPLE DEPENDENT CLAIM PRESENT   |   |            |                                 |                |            |  |                                       | 1      |                   | <del>                                     </del> | OR      |                     | + / +                  |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |   |            |                                 |                |            |  |                                       | •      | +130=             |  | OR      | +260=               |                        |
|  |   |            |                                 |                |            |  |                                       |        | TOTAL             |  | OR      | TOTAL               | 746                    |
| CLAIMS AS AMENDED - PART II (Cotumn 1) (Cotumn 2) (Cotumn 3)             |   |            |                                 |                |            |  |                                       |        | SMALL             | ENTITY   | OR      | OTHER               |                        |
| <b>AMENDMENT A</b>   |   | REM        | AIMS<br>AINING<br>TER<br>IDMENT |                | PF         | HIGHEST<br>NUMBER<br>NEVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA                      |        | RATE              | ADDI-<br>TIONAL<br>FEE                           |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | .2         | <u>2</u>                        | Minus '        |            | 20   | .2                                    | 1 1    | X\$ 9=            |  | OR      | 2 <b>x</b> \$18= 9  | 360                    |
|  | Independent   | <u>٠</u>   | <u> 2</u>                       | Minus          | ***        | 3  | •                                     | lt     | X39=              |  |         | X78=                | 7                      |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |            |                                 |                |            |  |                                       | ╏┠     | +130=             | <b>†</b>   | OR      | +260=               |                        |
|  |   |            |                                 |                |            |  |                                       |        | YOTAL             |  | OR      | TOTAL               | 197                    |
| (Column 1) 9-20-04 (Column 2) (Column 3)                                 |   |            |                                 |                |            |  |                                       |        |                   |  |         |                     | 11600                  |
| AMENDMENT B  |   | (CL)       | AIMS<br>AINING                  |                | 1          | GHEST<br>OMBER                             | PRESENT                               | ١٢     |                   | ADDI-  | 1 1     |                     | ADDI-                  |
|  | : .   |            | TER<br>DMENT                    |                |            | EVIOUSLY<br>AID FOR                        | EXTRA                                 |        | RATE              | TIONAL<br>FEE                                    |         | RATE                | TIONAL<br>FEE          |
|  | Total<br>Independent  | •          | u                               | Minus<br>Minus | -          | 22   |                                       |        | X\$ 9=            |  | OR      | X\$18=              |                        |
| ¥  | FIRST PRESE   | NTATIO     | N OF MI                         |                | FND        | 3<br>ENT CLAIM                             |                                       |        | X39=              |  | OR      | X78=                |                        |
|  |   |            |                                 |                |            |  |                                       |        | +130=             |  | OR      | +260=               |                        |
|  |   |            |                                 |                |            |  | •                                     | Δ1     | TOTAL<br>OUT, FEE |  | OR      | TOTAL<br>VOOIT, FEE | _                      |
|  | ******  |            | mn 1)                           |                |            | okumn 2)                                   | (Column 3)                            |        |                   |  | . ,     |                     |                        |
| N E  |   | REMA       | IMS<br>UNING<br>TER<br>OMENT    |                | PRE        | IGHEST<br>UMBER<br>EVIOUSLY<br>VD FOR      | PRESENT<br>EXTRA                      | ſ      | RATE-             | ADDI-<br>TIONAL<br>FEE                           |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total   | <u>•22</u> |                                 | Minus          | -/         | /2   | - Ø                                   |        | X\$ 9=            |  | OR      | X\$18=              |                        |
|  | Independent .   | • 2        |                                 | Minus          | ***        | 3  | - 8                                   | -      | X39-              |  | ŀ       | X78≈                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                           |   |            |                                 |                |            |  |                                       |        | 130=              |  | OR      | Viga                |                        |
| • II   | If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |            |                                 |                |            |  |                                       |        |                   |  | OR      | +260=               |                        |
| - 8  | "" if the "Highest Number Previously Pald For" IN THIS SPACE is less than 20, enter "20." ""If the "Highest Number Previously Pald For" IN THIS SPACE is less than 2, enter "20." |            |                                 |                |            |  |                                       |        |                   |  | OR A    | TOTAL<br>DDIT. FEE  |                        |
| Ť  | he Highest Mum  | ber Previo | ously Paid                      | For (Total or  | indepe     | re is used to the i                        | i a, emer "a,"<br>highest number      |        | DIT. FEE L        | ropriate box                                     | in catu | mn 1.               |                        |